United States District Court

for the

District of Oregon

)		
KEY KNIFE, INC.,)		
Plaintiff(s) V.)))	Civil Action No.	3:17-cv-00700 -AC
CORTEX NORTH AMERICA CORPORATION; and BURTON SAW AND SUPPLY, L.L.C.,)))		
Defendant(s))		

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) BURTON SAW AND SUPPLY, L.L.C.,

c/o Registered Agent, Corporation Service Company

2711 Centerville Rd., Suite 400

Wilmington, DE 19808

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney,

whose name and address are: Timothy S. DeJong

Date: 05/04/2017

Jacob S. Gill

Stoll Stoll Berne Lokting & Shlachter P.C.

209 S.W. Oak St., Suite 500

Portland, OR 97204

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

MARY L. MORAN, Clerk of Court

By: s/Elizabeth Potter, Deputy Clerk

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

	This summons for (name	ne of individual and title, if any)						
was re	ceived by me on (date)							
	☐ I personally served the summons on the individual at (place)							
	-		On (date)	; or				
	☐ I left the summons at the individual's residence or usual place of abode with (name)							
	, a person of suitable age and discretion who resides there,							
	on (date), and mailed a copy to the individual's last known address; or							
	☐ I served the summo	ns on (name of individual)			, who is			
	designated by law to accept service of process on behalf of (name of organization)							
			on (date)					
	☐ I returned the summ		; or					
	☐ Other (specify):							
	My fees are \$	for travel and \$	for services, for a total of \$	0.0	0			
	I declare under penalty	of perjury that this informat	tion is true.					
D .								
Date:			Server's signature					
			Printed name and title					
			Server's address					

Additional information regarding attempted service, etc: